





# HARBORVIEW MEDICAL CENTER MAJOR INSTITUTIONS STANDING CITIZENS ADVISORY COMMITTEE

Harborview Medical Center Major Institutions Standing Citizens Advisory Committee

### Members

Larry Brouse – Chair Kristen O'Donnell John Dolan Frederick Scheetz Anne Fiske Zuniga S Anne Newcombe Leslie Watson Mike Greenen Kristen Johnson Ted Klainer

### **Ex-Officio Members**

Steve Sheppard – DON Michael Dorcy – DPD Elise Chayet – Harborview Medical Center MINUTES
Meeting #24
Wednesday, March 16, 2011

## **Members Present**

Larry Brouse – Chair Leslie Harper Miles Steve Butler Anne Newcombe Anne Fiske Zuniga Ted Klainer

## **Staff Present**

Steve Sheppard – City of Seattle, Department of Neighborhoods Michael Dorcy – City of Seattle Department of Planning and Development Elise Chayet – Associate Administrator Harborview Eileen Whaler – Executive Director, Harborview Medical Center

## **Others Present**

(see sign-in sheet)

# 1. Welcome, Introductions and Housekeeping

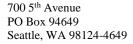
The meeting was opened by Larry Brouse. Brief Introductions followed. Elise Chayet introduced Eileen Whaler, executive Director of Harborview and Ted Klainer.

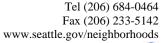
# 2. Housekeeping - Distribution of new member contact information

Larry Brouse informed the Committee that there is a new committee roster and asked that members carefully review the information on it to assure that their name and other contact information it is correct. He noted that this is especially important for new members.

Steve Sheppard noted that attendance was less than expected and desired, and that he will start calling members to remind them of the meetings. He noted that several members have now missed more that the two meetings in a row that the by-laws would allow consideration of their replacement. .









Mr. Sheppard also noted that many members have now passed the duration established for their initial appointment. While the by-laws allow an unlimited number of consecutive re-appointments, it appears to be time to consider rotating membership to assure that those on the Committee are still interested in participation. Larry Brouse asked that a review of attendance be done and provided to him.

Harborview representatives noted that the letterhead for King County has changed and that the Committee letterhead should change similarly. Steve Sheppard will get everything corrected on the letterhead as soon as possible.

# 3. Master Plan Update

Ted Klainer was introduces to discuss their ongoing efforts to update the current Master Plan. He noted that Harborview is undertaking an internal review of their plans and future needs. This is not a full Master Planning process but instead will look at various factors related to future development under the existing Master Plan. This will, however, likely require some additional meetings of the Committee over the next year.

Key items covered during this update were:

- 1. Outlined development already completed under the existing Master plan. He noted that the last time Harborview updated its major institution master plan was in 2000, almost 11 years ago. Many of the projects that were identified in that plan have been constructed, including those done via the MIMP and Bond project: the renovation of the Emergency Department, renovation of the Emergency Clinic; seismic upgrade of the East Hospital Tower, fiberglass seismic wrap of the East Hospital Tower; the 9-story Maleng Building and bridge connecting the East Hospital Tower; the 14-story Ninth and Jefferson Building; and the Patricia Bracelin Steel Building.
- Thanked various groups for their support during the past years of constructions and particularly the Committee and neighborhood for their positive working relationship for all these years.
  - They noted that Harborview couldn't have done the MIMP without support from the neighbors and Committee, or the bond funding. The neighborhood put up with a great deal of disruption during the construction but was very patient and was really great to work with. They also stated that Turner Construction had done a very good job.
- 3. Briefly discussed ongoing activities in preparation for possible modifications to future phases of construction under the existing Master Plan.
  - They noted that Harborview is currently in the early phases of updating the Master Plan and are undertaking two major efforts in this regard: 1) conducting a significant amount of research on projected patient volumes and demographics throughout the Puget Sound Region, and 2) assessing Harborview campus facilities against these projections. The team working on the master plan update is doing a careful review of all the buildings and facilities, and expects to finish this review in late spring or early summer of 2011. When the review is completed

they stated that they would request another Committee meeting be convened to receive information from this report.

4. Informed the Committee that Harborview hopes to complete the update without the necessity of undertaking a full new Master Planning process.

Elise Chayet noted that the existing Master Plan identified both planned and potential projects. Planned projects were identified through 2010 and then the potential projects between 2010 and 2020. At this point Harborview does not anticipate making any changes to any of the major development standards contained in the Master Plan, but felt it was important to look at the nature of the projected or potential projects in relationship to changing information on projected patient volumes and other possible changes related to health care reform. The results of this effort may change the distribution of uses on remaining spaces and the sequence of projects, but not the overall square footage of other development standards.

5. Noted that there are a variety of demolitions still pending under the current Master Plan.

Demolitions remaining under the master plan include: , a) Harborview Hall, will be happening this year; b) East Clinic, which is next to the Center Wing; c) Multiuse Building, next to the Emergency Department; and d) Demolition of the old Medic One Building and Green Six-plea for a potential new multi-use building. Some of these will occur relatively soon and other are not yet scheduled.

Ms. Chayet noted that the demolition of the East Clinic is being re-evaluated. Recent studies have indicated that it may be possible to seismically stabilize the biding and possibly retain it rather than demolish it. This will be a major factor in determining new building use

6. Reviewed remaining potential planned projects:

Projects that remain are a) East Clinic site; and b) behind the current Research and Training Building, there is a site for potentially another research and training building. Ms. Chayet noted that the Ninth and Jefferson was going to be in two phases, first phase in the planned and second phase in the potential, but luckily with support of the neighborhood we constructed it all at once.

Steve Sheppard stated that Harborview is allowed to change uses and square footage on of remaining projects without a full master planning process so long as they stay within the development standards (heights, setbacks, FAR and total square footage of development) in the plan. However, it they either propose changes to those standards or exceed their allotted total amount of development they would have to complete a new plan, Mr. Sheppard also offered the opinion that it is unlikely that Harborview will have to do a full new plan.

## 4. Introduction of Harborview Hall Plaza

Discussion then turned to the development of the Harborview Hall Plaza. Ted Klainer stated that Harborview will soon begin demolition of the old Harborview Hall and is in the early phases of developing the formal plan for the central plaza (Hear to Campus) that will take its place.

Demolition of existing Harborview Hall will create a relatively large open space. This open space will provide an opportunity for a central gathering and circulation space and will also provide a dramatic vista from the east towards the Central Campus. It will create a relatively spectacular view from the east and a real sense of entry and focus to the campus.

Mr. Klainer also noted that Harborview is in the earliest phases of schematic design and briefly went over the status of the design process to this point. They noted that Harborview is using a design/build contracting process. Under this process the owners (in this case King County, Harborview, and UW) will create specifications and preliminary designs only. These are not full construction documents and instead are to a design development level. The project will then be put out to bid. The successful contractor will bid both on completion of designs, construction documents, and project construction.

Because of the process being used, the drawings being presented are schematics only. The drawing will be tightened up, cleaned up and finalized once the project is put out to bid. The expectation is that the successful bidder will team up a general contractor and architecture firm.

Staff briefly went over the projected schedule. Demolition is anticipated to start in the fall of 2011, probably in either September or October. However this is subject to some possible change since the project has not yet be put out to bid. Both demolition and construction of the new plaza are expected to take about 9 months with the demolition of the building itself taking about 2 to 3 months. Demolition will have to be done very carefully because of the buildings location next to an inpatient tower.

The major focus of the space will be for contemplative. There will be a considerable focus on making the space as contemplative as possible. Patients and visitors will be able to get out of the hospital and go out into the. There will be an inspirational use of lights, the lighting will provide visibility and transparency. Staff acknowledged, that there will be some security concerns and that extra emphasis will need to be given to that issue.

The plaza will itself will combine paving, grasses, lighting, seating and trees with the major focus on the lighting and trees. It is intended as a plaza. The plaza will be terraced with steps between them and two sets of light grids. There will also be a small outdoor bistro area adjacent to the Maleng Building. The hardscapes will have a design element that is partly intended to be of visual interest from the surrounding buildings. An effort will be made to coordinate lighting standards with the surrounding area.

## 5. Update on new No-Smoking Policy

Harborview staff presented a general overview of the Hospital's new no-smoking I policy for patient's, visitors and staff Harborview is part of the initiative that public health is spear heading with all of the hospitals in King County to become smoke free campuses,

all hospitals are smoke free buildings, the board of health has passed regulations regarding how far you can smoke from openings in public buildings. The Hospital Association and public health have taken it one step further to say we want to be a smoke free campus, includes our patients, visitors, and staff. We will be targeting May 31 as the start of the initiative.

# 6. Annual Report

Copies of the Annual Report were handed out to all members and they will be sent in electronic form to the members not at the meeting. Annual Report covers the last year and a half, reports on the projects and construction.

Harborview staff noted that they are working with the City and County to demolish the 6plex that is part of the Harborview campus.

## 7. Other Announcements

Steve Sheppard stated that he would like the Committee to meet again sometime in mid-May to discuss whether people are still interested in staying on the Committee or talk about replacements if needed. Steve will make calls to Committee members to talk to everyone regarding their continued commitment to the Committee.

Larry Brouse reported to the Harborview CAC that there is a new Committee formed for the Virginia Mason Major Institution Master Plan and the Harborview Committee was held up as the template on how one of this Committee should work, both the institution and the community, he just wanted to share the news with the Committee.

# 8. Adjournment.

No further business being before the Committee, the meeting was adjourned.